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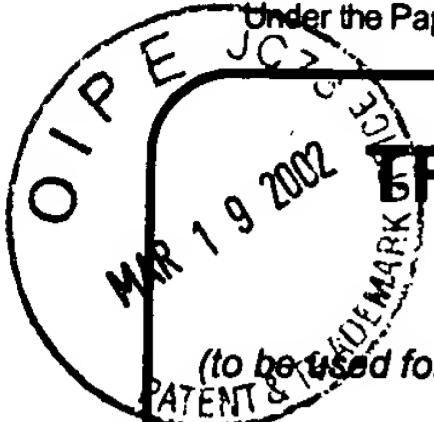
PTO/SB/21 (08/00)

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Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL
FORM

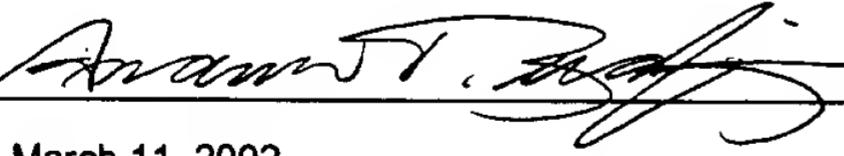
(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Return Postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s)	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
	Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

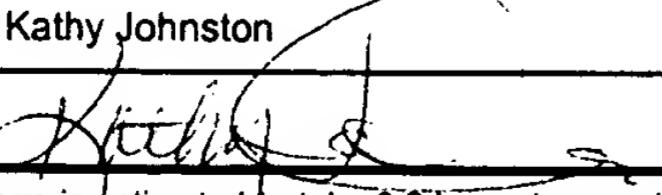
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm and Individual name	Townsend and Townsend and Crew LLP Andrew T. Serafini, Ph.D.	
Signature		
Date	March 11, 2002	

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

March 11, 2002

Typed or printed name	Kathy Johnston	
Signature		
	Date	March 11, 2002

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PA 3206949 v1

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PTO/SB/17 (09-00)

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

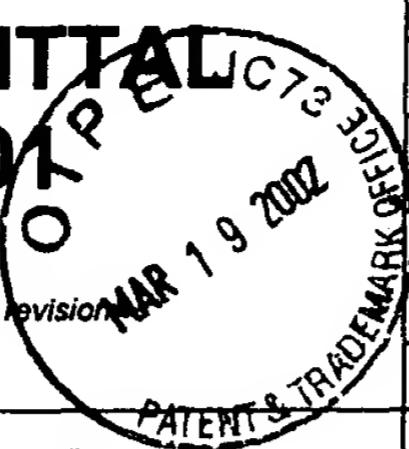
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**FEE TRANSMITTAL
for FY 2001**

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$ 55)



Complete If Known

Application Number	09/737,246
Filing Date	December 13, 2000
First Named Inventor	Lu, Peter S.
Examiner Name	Bridget E. Bunner
Group Art Unit	1645
Attorney Docket No.	020054-000311US

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THURSDAY 1600/2000

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number: **20-1430**

Deposit Account Name: **Townsend and Townsend and Crew LLP**

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed:

Check Credit card Money Order Other

FEE CALCULATION

1. **BASIC FILING FEE**

Large Entity Fee Code (\$)	Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101 740	201 370	370	Utility filing fee	
106 330	206 165	165	Design filing fee	
107 510	207 255	255	Plant filing fee	
108 740	208 370	370	Reissue filing fee	
114 160	214 80	80	Provisional filing fee	

SUBTOTAL (1)

(\$)

2. **EXTRA CLAIM FEES**

Total Claims	-20**	=	Extra Claims	X	Fee from below	=	Fee Paid
Independent Claims	-3**	=		X		=	
Multiple Dependent		X				=	

Large Entity Fee Code (\$)	Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
103 18	203 9	9	Claims in excess of 20	
102 84	202 42	42	Independent claims in excess of 3	
104 280	204 140	140	Multiple dependent claim, if not paid	
109 84	209 42	42	** Reissue independent claims over original patent	
110 18	210 9	9	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2)

(\$)

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105 130	205 65	65	Surcharge - late filing fee or oath	
127 50	227 25	25	Surcharge - late provisional filing fee or cover sheet	
139 130	139 130	130	Non-English specification	
147 2,520	147 2,520	2,520	For filing a request for reexamination	
112 920*	112 920*	920*	Requesting publication of SIR prior to Examiner action	
113 1,840*	113 1,840*	1,840*	Requesting publication of SIR after Examiner action	
115 110	215 55	55	Extension for reply within first month	55
116 400	216 200	200	Extension for reply within second month	
117 920	217 460	460	Extension for reply within third month	
118 1,440	218 720	720	Extension for reply within fourth month	
128 1,960	228 980	980	Extension for reply within fifth month	
119 320	219 160	160	Notice of Appeal	
120 320	220 160	160	Filing a brief in support of an appeal	
121 280	221 140	140	Request for oral hearing	
138 1,510	138 1,510	1,510	Petition to institute a public use proceeding	
140 110	240 55	55	Petition to revive - unavoidable	
141 1,280	241 640	640	Petition to revive - unintentional	
142 1,280	242 640	640	Utility issue fee (or reissue)	
143 460	243 230	230	Design issue fee	
144 620	244 310	310	Plant issue fee	
122 130	122 130	130	Petitions to the Commissioner	
123 50	123 50	50	Petitions related to provisional applications	
126 180	126 180	180	Submission of Information Disclosure Stmt	
581 40	581 40	40	Recording each patent assignment per property (times number of properties)	
146 740	246 370	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149 740	249 370	370	For each additional invention to be examined (37 CFR § 1.129(b))	
179 740	279 370	370	Request for Continued Examination (RCE)	
169 900	169 900	900	Request for expedited examination of a design application	
Other fee (specify)				

The Commissioner is authorized to charge any additional fees to the above noted Deposit Account.

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$55)

**or number previously paid, if greater; For Reissues, see above

SUBMITTED BY			Complete (if applicable)	
Name (Print/Type)	Andrew T. Serafini, Ph.D.	Registration No. (Attorney/Agent)	41,303	Telephone 650-326-2400
Signature				Date March 11, 2002

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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